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Listening to older people and valuing their personhood

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Publication Details Citation

Middleton, R. (2019). Listening to older people and valuing their personhood. Faculty of Science, Medicine and Health - Papers: Part B. Retrieved from <https://ro.uow.edu.au/smhpapers1/997>

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Abstract

In a busy environment such as health, we often feel a sense of being rushed and an inability to spend time with people to really listen and respond to their needs.

Keywords

listening, personhood, their, older, people, valuing

Publication Details

Middleton, R. (2019). Listening to older people and valuing their personhood. Australian Nursing and Midwifery Journal, 26 (7), 42.

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Listening to older people and valuing their personhood

In a busy environment such as health, we often feel a sense of being rushed and an inability to spend time with people to really listen and respond to their needs. With an ageing population, where one in seven people are aged over 65 (AIHW 2018), it is certain that we will have many encounters with older people in our health settings. So how can we have meaningful interactions where we listen to and value older people? How can we contribute to helping older people maintain a sense of personhood (Tanner 2010) when in healthcare environments that can challenge their identity and autonomy as a competent and independent adult?

Autonomy encompasses having control and choice (Ryan et al. 2008). By recognising autonomous personhood, we establish the human rights of the individual and also our responsibility to deliver ethical healthcare (Smith 2016). For the older person, autonomy can be (or feel) removed through various means in the healthcare process. Person-centred approaches and practices in nursing and midwifery are critical to delivering ethical, safe and compassionate care where personal autonomy is valued. When this occurs, person-centred approaches in our practice ensure we develop and enhance effective workplace cultures (Manley et al. 2011).

When considering older people, Hess et al. (2011) found in their research that the quality of older people's experiences were founded in their care experience and the communication they had with healthcare providers. So our challenge as healthcare providers is to move towards person-centred care, a practice that explicitly requires that we see *people*, not patients or clients. This can mean suspending judgements, beliefs and attitudes in order to develop care that promotes healing (McCormack and McCance, 2010). McCormack and McCance (2010) also acknowledge that the provision of truly person-centred care can feel thwarted by structural elements of our healthcare systems, which leads to our frustration as healthcare providers. One of these elements is the 'busyness' we experience daily. Despite this, we have a responsibility as health professionals to listen actively to older people. This will thereby promote and support a sense of autonomy, feeling valued and maintaining

personhood in this population which not only is increasing, but has much to contribute to our own learning.

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